

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000117422

**FILED**  
**Apr 14, 2009**  
**Secretary of State**

**Entity Name:** CFBP, LLC

**Current Principal Place of Business:**

5300 RECKER HIGHWAY  
WINTER HAVEN, FL 33880

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 27404  
PHILADELPHIA, PA 19118

**New Mailing Address:**

**FEI Number:** 20-8308289

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROUSSO, MARK  
18851 NE 29 AVE  
SUITE 900  
AVENTURA, FL 33180 US

**Name and Address of New Registered Agent:**

ALEXANIAN, DIRAN  
50 SPOONBILL ROAD  
MANALAPAN, FL 33462 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DIRAN ALEXANIAN

04/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CFBP, INC.  
Address: PO BOX 27404  
City-St-Zip: PHILADELPHIA, PA 19118

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DIRAN ALEXANIAN

MGM

04/14/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date